surgeon; it is aimed as sharply as a biopsy needle at introducing the trainee surgeon to the surgical pathology of the breast.

It encompasses current ideas on the morphology of breast disease from amastia to vasculitis. The gross pathological basis of clinical examination staging and the current microscopic classification of benign proliferation and malignant disease are neatly reviewed. Perhaps the greatest value of this book is to help the surgeon interpret the nuances of arcane phraseology in the surgical pathology report, and then combine the important messages from the pathologist with his clinical findings in predicting prognosis.

This book is a useful read for the surgical trainee. It makes no claim to be a bench book to aid the microscopist, but it is also good for the beginning pathologist as a guide to the needs of their future surgical customers. It is a pity that there is only brief mention of histology beyond the haematoxylin and eosin slide. The opportunity to include in such a general review more on the important part of pathology that embraces the molecular immune and cytochemical aspects of tumour biology was missed.

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Lecture Notes on the Physics of Radiology, Susan J. Armstrong. Pp. 200, illustrated. Clinical Press, Bristol, 1990. Paperback £15.00.

This splendid little book sets out to cover the basics of physics as applied to radiology. Written by a trainee radiologist – not a physicist – the text benefits from a clear, concise style in which superfluous detail is avoided. A basic working knowledge of a modern radiology department is assumed. There are 15 chapters covering atomic structure and radioactivity, the production of X-rays, X-ray generating apparatus, interaction between X-rays and matter, dosimetry, films and screens, image quality, fluoroscopy, special techniques, computed tomography, ultrasound, radionuclide imaging, magnetic resonance imaging, quality control and radiation protection.

Inevitably in a book of this size much detail is omitted but I suspect most radiologists will find this a help, not a hindrance! Reference to larger, standard texts may occasionally prove necessary. Equations, for example are provided but not usually derived and I would have also appreciated more frequent use of line diagrams. These are minor criticisms, however, and do not detract from the overall impact of the book.

The expansion of the modern radiology department with the introduction of a wide variety of imaging modalities has placed even greater demands on the trainee radiologist and the requirement to understand the physical principles upon which his chosen speciality is based. This book is aimed primarily at such a trainee. It fulfills the role superbly and I have little doubt will prove an extremely popular 'crammer' for the first part of the F.R.C.R. examination. At £15.00 it represents excellent value for money and arguably should assume a place in every radiologist's library – trainee or not!

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The Challenges of Medical Practice Variations, edited by Tavs Folmer Andersen & Gavin Mooney. Pp. x + 200. Macmillan Press, Scientific & Medical, Basingstoke, Hampshire, 1990. Hardback £37.50, paperback £14.95.

This book antagonizes the clinician from it's very first page and essentially misunderstands the philosophy of science. It is also repetitive. It overly concerns itself with variables of clinical practice noted by the business administrator, in the hope that this will reduce costs. It is disappointing that it is not until the penultimate chapter that some wrongs are righted, admitting that there is a need to finance studies, trials and grass root investigations into the variability of clinical practice. Most of the writers believe that scientific method produces only truth. The works of Karl Popper have not been read: there is no empathy with the struggle towards truth. There is the general feeling of people thinking they can and should decide individual treatments from a very distant vantage point. Some chapters, however, are definitely worth reading: I had not realized that the open prostatectomy might make a comeback! I enjoyed the deliberate contrast between not performing a transurethral resection of the prostate (TURP) with that of performing a TURP; by risk analysis it appears that performing TURP is the choice to be made for those with complications, such as retention, or with symptoms.

Finally, and surprisingly, it fails to really find a solution to the problem of variability. I would suggest that if these writers think that science is all truth, we must reveal the fact that all or most of which we now perform is wrong – and will be shown to be wrong in time. Fibre content of diet for diverticular disease or carbohydrate contents of diabetic diets are reminders of recent examples of this. We might also remind ourselves that discarded scientific theories only die when that generation of scientists die. We should all concentrate on improving public knowledge about treatments: and include in this how politicians and the media can rapidly increase health care costs by advocating liberal liver transplants or hip replacements performed on people so young that they will need many further such operations in their lifetimes.

I am interested in variation of practice but I consider that this book is not cost effective for a clinician, as there are too few data at too great a cost.

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